

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the Patent Application of

Takahiro FUKUHARA et al.

Application No.: 09/919,925

Filed: *August 2, 2001*For: IMAGE CODING DEVICE AND METHOD THEREOF AND IMAGE DECODING  
DEVICE AND METHOD THEREOFExaminer: *Duy M. Dang*

Art Unit: 2621

Conf. No. 3992

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OCT 08 2004

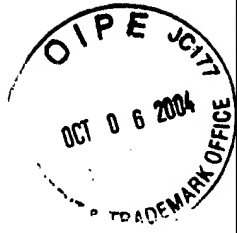
**RESPONSE TO RESTRICTION REQUIREMENT****Technology Center 2600**MS Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450 Washington, DC 20231

Sir:

In full and timely response to the Office Action mailed on September 23, 2004,  
requiring an election of invention, please amend the above-identified application as follows.

**Amendments to the Specification** begin on page 2 of this paper.**Amendments to the Claims** are reflected in the listing of claims, which begins on  
page 8 of this paper.**Remarks/Arguments** begin on page 12 of this paper.

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AMENDMENT TRANSMITTAL LETTER				Docket No. SON-2194	
Application No. 09/919,925		Filing Date August 2, 2001		Examiner D. M. Dang	
				Art Unit 2621	
Applicant(s): Takahiro Fukuhara					
Invention: IMAGE CODING DEVICE AND METHOD THEREOF AND IMAGE DECODING DEVICE AND METHOD THEREOF					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	16	- 20 =		x	0.00
Independent Claims	7	- 7 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. <u>18-0013</u> in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-0013</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
_____ Ronald P. Kananen Attorney Reg. No.: 24,104				Dated: <u>October 6, 2004</u>	
RADER, FISHMAN & GRAUER PLLC 1233 20th Street, N.W., Suite 501 Washington, DC 20036 (202) 955-3750 Customer No. 23353					

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